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DOCTORS WYNDER AND HORN DISCUSS CIGARETTE SMOKING

MITCHELL KRAUSS: "Cigarette smoke has blown back into the news within the past month, what with the Federal Trade Commission urging stiffer health warnings in cigarette advertising, to go along with the words of caution which have been appearing on packs for over a year.

"Then last week, the much publicized Columbia filter was introduced, claiming to appreciably increase filtration of tars and other substances, and thus materially increase the safety of smoking. And the Department of Health, Education and Welfare supported the FTC by making specific proposals for so-called health hazard warnings.

"Tonight we discuss these government interventions, along with efforts being made to develop safer cigarettes. As we meet Dr. Ernest Wynder of the Sloan Kettering Institute for Cancer Research and a leading expert on smoking and health and Dr. Daniel Horn, director of the National Clearing House for Smoking and Health, a division of the United States Public Health Service. They are interviewed by science reporter, Ed. Edelson."

ED EDELSON: "Dr. Horn, it's been three and a half years since the Surgeon General's report warned about the health hazards of smoking; hardly a month has gone by without a new warning. And yet, at this point in time, more people -- or people are smoking more cigarettes than ever before. Why this failure to get the message across?"

DR. DANIEL HORN: "Well, I--I wouldn't accept the fact that the message has not been got across. True, there are more cigarettes that were manufactured last year than the year before and more than the year before that. But this is likely because there are more people now than there were before. The proportion of people smoking, the per capita consumption, has stayed fairly constant over the last four or five years."

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lung cancer -- our evidence is the best. We start with logical reasoning. We inhale an irritant. We then have our clinical experience which shows that the vast majority of our lung cancer patients are heavy smokers and we but rarely see a lung cancer patient who is a non-smoker. And we can show a vast statistical difference in smoking habits between lung cancer patients and the general population. We have shown biologically that -- that tobacco smoke condensates produces cancer in animals. In the laboratory, Dr. Hoffman has shown that there are many carcinogens in -- and carcinogens are cancer producing substances -- in tobacco smoke that we have isolated in pure form.

"And in terms of pathology, Dr. Arbut ^{Amis} (?) has shown that there are changes in our lungs that are in line with the number of cigarettes that we have smoked.

"So I know a very few scientific pieces of evidence, particularly in the area of epidemiology, which is a study that relates environmental factors to diseases, that it's so well established that the relationship of smoking to certain types of cancer."

EDELSON: "Yes, but if the tobacco industry is very insistent on pointing that the causal relationship has not been established."

WYNDER: "Well, the term cause is a -- a semantic one; it has been explored in some detail in the previous Surgeon General's report. I, myself, like to call it a causative relationship. And to me, a causative relationship is one where if you remove a given factor, the di -- the disease will decline. Now this has been shown for lung cancer, both Dahl & Hill (?) have shown in England and Hammond in this country, that people who stop smoking after about five years will have a reduce risk of lung cancer. So we have demonstrated, therefore, that when we remove the factor, in this case cigarette smoking, the lung cancer rate will decline.

"Now, certainly, to the individual who gets lung cancer, it really makes no difference whether you call it effective cause or whatever you call it. If he uses it, cigarettes, his risk goes up; if he doesn't smoke cigarettes, his risk is very small indeed."

EDELSON: "Well, is there any -- you talked about removing the factor. Until now -- up until now, about the only real way for removing that factor is to stop smoking. What are the chances of getting a safe cigarette? Is that a contradiction in terms?"

WYNDER: "Well, we do not like to use the term 'safe'. I, personally, do not even like to use the term 'safer'. I do like to use the term 'less harmful'. Certainly the best way to avoid all of these diseases that the Surgeon General's report has shown to be linked to cigarette smoking can be accomplished by not smoking

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at all. But, unfortunately, as Dr. Horn just stated, there are always those in our population who will continue to smoke regardless of the evidence; in part, because I believe within us harbors always the illusion of immortality.

"And to those who want to continue to smoke, there are two suggestions. One, of course, is to smoke fewer cigarettes. Two, to attempt not to inhale. Three, to smoke only a certain portion of the cigarette and not to smoke it to the very end, because it has been shown that the further down you smoke the cigarette the more tar and nicotine you get into your system. And then another way is, of course, to choose a cigarette that is as low in tar and nicotine content as possible. In other words, we have favored for a long time a reduction of tar and nicotine levels within the smoke of all American cigarettes."

EDELSON: "Well, this new Strickman filter, which Columbia University announced last week, reportedly reduces tar and nicotine by something up to 70%. Do you know -- have you -- what is your information on this filter?"

WYNDER: "Well, I cannot comment on this particular filter because I have not seen the scientific evidence. It is difficult to believe that a filter will mechanically remove 70% of the particulate matter and at the same time have a normal pressure drop, and at the same time have a normal taste. Because it is known that a good portion of the taste resides in the particulate matter. So, I think that this is a very difficult thing to accomplish."

"But with all the attention that was given to this particular filter development, it should be clear to the smoker that -- that there are today on -- on the Amer -- on the American market today, cigarettes available which are far lower in tar and nicotine content than other American cigarettes. And -- so if the consumer is -- is worried and would like to smoke a cigarette that is low in tar and nicotine, he can already today choose brands which are lower in tar and nicotine."

EDELSON: "Well, Dr. Horn, it would seem to me that one of the jobs of the Public Health Service would be to tell people which are the, quote, 'safer cigarettes'. I..."

HORN: "We have every intention of doing this. At the present time, the Federal Trade Commission has set up a laboratory for testing cigarettes under standardized conditions and they are expecting to report to Congress on the results of the testing of all brands of cigarettes on a periodic basis. Certainly, when that information is available, we consider it our obligation to see that this is available to every cigarette consumer in the country."

EDELSON: "Well, when the tobacco companies now report tar and nicotine content, they usually say that no health claim is made or implied. Will the federal report continue saying..."

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